

6692A

Responsibilities for Student Medication

Regulation

Original Adoption: 10/23/2000

Effective Date: 10/24/2007

Revision Dates:

I. RESPONSIBILITIES

A. *Parent Responsibilities.*

1. Parents or guardians have the responsibility to obtain the licensed prescriber's consent to the administration of the medication at school and to deliver, or cause to be delivered, to the school that consent prior to the school personnel administering the medication.
2. Parents and guardians, or the student if over age 18, must supply the school each school year with a signed, written request to administer medication to the student. An oral request may occasionally be allowed only if the request is reduced to writing within two school days of the request, provided that the school may rely on the oral request until such written request is received, if such reliance is in the best interests of the student.
3. Parents will deliver all medications in the original container bearing the original pharmacist's label clearly indicating the student's name, means of delivery, times of administration and dosage or, in the case of non-prescription medication the manufacturer's label clearly displaying the instructions and recommended dosage. Medications should be brought to school by the parent/guardian or by an authorized adult. Parents are responsible to supply the school with adequate medication to cover the dosages to be administered at school or by school personnel.
4. Parents will notify the school immediately in writing of any change in the student's prescription medication administration. Parents will supply the new medication, labeled container and pharmacy instructions and a new signed medication consent form for any such change.
5. In the instance of self-administered medications allowed under the exceptions to this policy, parents must supply a written authorization for such self-administration.
6. Parents and guardians have the responsibility to collect from the school any nonadministered medication supplied to the school after the term of

the prescription has expired or at the end of the school year, whichever occurs first. In the event that parents fail to collect such medicine, the school personnel may destroy the excess medication following district procedures related to destruction of student medication.

B. *School Health Personnel Responsibilities.*

1. School Health personnel shall provide parents and guardians, or students, if over 18, with the appropriate medications forms required under this policy.
2. The school nurse may request further information about the prescription, if needed, prior to the administration of the substance, including a licensed prescriber's consent to administration.
3. In accordance with standard nursing practice, the school nurse may refuse to administer, or allow to be administered, any medication, which, based on her/his individual assessment and professional judgment, has the potential to be harmful, dangerous or inappropriate. In these cases, the parent/ guardian, the licensed prescriber and the district nursing services manager shall be notified immediately by the school nurse and the reason for the refusal explained. Such refusal shall be reduced to writing and filed with the student health record.
4. The school nurse or person delegated by the nurse shall maintain records of medication administration in the student's health record.
5. The school nurse shall participate in planning medication use for any student with an Individualized Education Plan (IEP), Section 504 plan, or Individual Health Plan (IHP). Medication used by children with a disability shall be administered according to the terms of their IEP, Section 504 plan or IHP.
6. The school nurse shall be responsible to train any person she or he has delegated to administer medication under this policy with the regulations and procedures for such administration.
7. The school nurse shall designate appropriate storage for medication following district procedures.

C. District Nursing Services Responsibilities.

1. District Nursing Services staff shall establish detailed procedures for the storage and administration of medications. These procedures and guidelines shall be published by District Nursing Services and supplied to every school health office.
2. District Nursing Services shall establish and conduct training for school health personnel on procedures related to the administration of medications to students.

Legal References:

Minn. Stat. § 13.32 (Student Health Data)
Minn. Stat. § 121A.21 (Health Personnel)
Minn. Stat. § 121A.22 (Administration of Drugs and Medicine)
Minn. Stat. § 121A.221 (Possession and Use of Asthma inhalers by Asthmatic Students)
Minn. Stat. § 121A.222 (Possession and Use of Nonprescription Pain Relievers by Secondary Students)
Minn. Stat. § 121A.2205 (Possession and Use of Nonsyringe Injectors of Ephinephrine)
Minn. Stat. § 151.212 (Label of Prescription Drug Containers)
20 U.S.C. 1400, *et seq.* (Individuals with Disabilities Education Improvement Act of 2004)
29 U.S.C. 794, *et seq.* (Rehabilitation Act of 1973, § 504)
42 U.S.C 1301 *et seq.* (Health Insurance Portability and Accountability Act of 1996 – HIPAA)
45 CFR 164 (HIPAA)

Cross References:

MPS Policy 5631 (Drug Free Schools, Chemical Health, Use and Abuse)
MPS Policy 5200 (Citywide Discipline)